



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of

KAWADA et al.

Serial Number: 09/910,862

Filed: July 24, 2001

For: LIQUID CRYSTAL DISPLAY DEVICE

Attorney Docket No. HITA.0090

Art Unit 2674

Examiner
Lesperance, Jean E.

Honorable Assistant Commissioner
for Patents
Washington, D.C. 20231

RECEIVED

AUG 11 2004

Technology Center 2600

COVER LETTER

Sir:

[x] The fee for submission of claims is calculated as shown below:

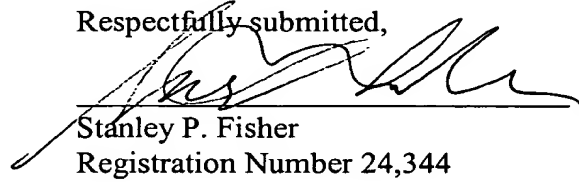
FOR	TOTAL WITH NEW CLAIMS ADDED	TOTAL CURRENTLY ON FILE	CLAIMS PAID	RATE	CALCULATION
Total Claims	23	23	(Over 20)	x \$18	0.00
Independent Claims	3	3	(Over 3)	x \$86	0.00
MULTIPLE DEPENDENT CLAIM(S)				+ \$290	0
REDUCTION FOR FILING BY SMALL ENTITY (note 37 C.F.R. §§ 1.9, 1.27, 1.28). IF APPLICABLE, VERIFIED STATEMENT MUST BE ATTACHED				x ½	
			TOTAL		0.00

In addition, the below-identified communications are submitted in the above-captioned application or proceeding:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Response to Office Action
(with Claim Amendments) | <input checked="" type="checkbox"/> Petition for Extension of Time (1 month) |
| <input type="checkbox"/> Substitute Specification & marked-up copy | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> Preliminary Amendment | <input type="checkbox"/> Letter to Draftsperson |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Assignment |
| | <input type="checkbox"/> Declaration of one skilled in the art |

- [] Please charge my **Deposit Account Number** _____ in the amount of _____ to cover the fees for _____. A duplicate copy of this paper is enclosed.
- [x] A check in the amount of **\$110.00** to cover the one-month extension fee is enclosed.
- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,


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August 6, 2004